Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

		CLAIMS AS	S FILED	SMALLE	SMALL ENTITY		OTHER	TUAN			
Γ -,	STATE OF A INC.		T	(Column 1)		umn 2)	TYPE [SMALL	
L	OTAL CLAIMS	· · · · · · · · · · · · · · · · · · ·	33	33			RATE	FEE] '	RATE	FEE
FC	OR		NUMBER	FILED	NUME	BER EXTRA	BASIC FEE	E 370.00	OR	BASIC FEE	740.00
TC	OTAL CHARGEA	ABLE CLAIMS	33 mir	33 minus 20= *			X\$ 9=		OR	X\$18=	
INE	DEPENDENT CI	LAIMS	i m	ninus 3 =	*		X42=		OR	. 704	
MULTIPLE DEPENDENT CLAIM PRESENT							<u> </u>	+	1		
* If	the difference	e in column 1 is	column 2	+140=		OR					
			TOTAL		OR						
		(Column 1)	VIAI EIA DEP	MENDED - PART II (Column 2) (Column			SMALL	SMALL ENTITY O			THAN ENTITY
V		CLAIMS REMAINING		HIGHI	IEST			ADDI-	1 /		ADDI-
AMENDMENT A		AFTER AMENDMENT		PREVIO PAID I	OUSLY	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL
NON	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM				1	i	
							+140=		OR	+280=	
							TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
_		(Column 1) CLAIMS		(Colum		(Column 3)	-				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	'ENDENT	CLAIM						
							+140= TOTAL		OR	+280= TOTAL	
							ADDIT. FEE		OR A	TOTAL ADDIT. FEE	
	فالمستنب المست	(Column 1) CLAIMS	The said of the Said of	(Colum		(Column 3)			_	_	
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
MO	Total		Minus	**		=	X\$ 9=		27	X\$18=	FEE
ME	Independent	*	Minus	***		=-	1		OR		
٩	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	'ENDENT	CLAIM		X42=	 ′	OR	X84=	
* 1	f the entry in colur	mn 1 is less than the	a antru in colu	0	+140=	(OR	+280=			
**	If the "Highest Nun If the "Highest Nur	mber Previously Pai mber Previously Pai	id For" IN THIS aid For" IN THIS	S SPACE is S SPACE is	less than	n 20, enter "20." n 3. enter "3."	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

DATE:	05-30-0	3			
TO:	10 0827	90			
FROM:	Office of Initial Paten	ıt Examinatio	on		
SUBJECT:	Fee Due			÷	
APPLICAT	TON NUMBER:		··		
Office for the authorization	for the attached docume following reason. Post to charge a deposit a ppropriate fee. If an action of the charge in the charge is the charge in the charge is the charge in	lease check iccount. If a	the applicatio n authorizatio	n for the a	ppropriate it. please
· Insuffici	ent fee by check			ECEVED UN - 2 2003	
火 Insuffici	ent funds in deposit ac	ecount			ICE OF PETITIONS
Declined	d credit card		•	•	
. Non autl	norization for charge to	o deposit acc	ount		
No fee si	ubmitted per requirem	ent ^A			
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The correct	fee code:		amoun	s 1	450 1108 342
The suspend	ded fee code: 197		amount	- S	1/08
Fee Due			amount	Ś	342
	uny questions, please c z at 703-308-3642.	ontact Cynth	ila Streater at	703-306-5	430 or

Abelog

Terminal Operator